								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO									i .				
Effective October 1, 2003									0/76	<u>55,</u>	583	<u> </u>	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								MALL E	NTITY	OR	OTHER		
TO	OTAL CLAIMS	15					Г	RATE	FEE	7	RATE	FEE	
FC	DR		NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	385.00	OR			
TC	TAL CHARGE	ABLE CLAIMS	15 minus 20=		* Ø		Ţ	X\$ 9=		OR	X\$18=		
INC	DEPENDENT C	LAIMS	ج minus 3 =		· Ø		r	X43=	 	OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		1 1	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL	<u> </u>	OR OR	TOTAL	770	
CLAIMS AS AMENDED - PART II									L		OTHER		
	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	** .		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	<u> </u>			X43=		OR	X86=		
Ш	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=		
	4,5,11							TOTAL		┨┈╻	TOTAL		
		(Column 3)	AD	DIT. FEE	L]	ADDIT. FEE						
AMENDMENT B	(Column 1) CLAIMS REMAINING			HIGHEST			Г		ADDI-	1 f	. 1	ADDI-	
		AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA	Ľ	RATE	TIONAL FEE		RATE	TIONAL	
	Total	*	Minus	**		=	,	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43= .		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								145=			+290=		
							L	TÖTAL		OR	TOTAL	•	
								OIT. FEE		OR A	DDIT. FEE		
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST										_			
MEN		REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	T	(\$ 9=		OR	X\$18=	1	
	Independent	*	Minus	trans		=	卜	(43=			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						H	``		OR	700=		
* 14	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=		
** 11	** If the "High st Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "High st Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT. FEE		
T	he "Highest Num	ber Previously Paid	id For IN IMI I For" (Total or	SPACE IS Independer	iess than it) is the	i 3, enter "3.". highest number fo		IT. FEE L in the app	ropriate box		•		